MDPB Minutes January 15, 2003

Members present:, J. Burton, S. Diaz, K. Kendall, D. Stuchiner, P. Liebow, E. Smith, D. Ettinger, B. Callamore

MEMS Staff: J. Bradshaw

Regional Coordinators: J. LeBrun, Rick Petrie, B. Dunwoody, Dan Paladino, Jeff Regis

Guests: P. Marcolini, A. Azarra

Item	Discussion	Action	Follow-up
Previous minutes: 010/20/02	none	Adopted	None.
Old Business 1. Legislative Update	There is a large deficit in the State government. Large cutbacks are expected in the budget of all agencies, including EMS. A new commisioner to public safety has yet to be announced.	Bradshaw will keep group informed of developments.	None
2. Critical Care Ground Services	Dr. Kendall indicated that the group wishes to table the presentation until the next meeting.	None.	Item for the next agenda.
3. Airway program	 Dr. Diaz circulated a proposed draft protocol and supporting materials. Lengthy discussion covering many elements of the airway revision. The plan will include: 1. A new protocol, separate protocols for pediatric and adult patient. There will be restrictions on CRIC application, precautions on pediatric application, and LMA/Ctube mandated integration. 2. Eduational materials will be available to cover all new additions to Maine EMS: LMA, Ctube, stylets, etc. 3. Rollout period to allow for integration of airway adjunts, new practice as well as a cut off period for mandatory practice by services. 	-Remain on agenda. -Diaz will continue integrating and incorporating pieces with asssistance from Burton, Kendall. -Continue protocol review/development. -Continue development of timelines for onset of LMA/Ctube practice as well as final cut off date (2 or 3 years).	Item for the next agenda.

New Business 4. Other	4. There will be a "base standard practice" including mandated ET materials currently available, CRIC, LMA with option of Ctube addition, ETCO2/EDD. This will be linked to ALS service licensure and applicable to Paramedic and intermediate levels. Services not meeting the "base" will be restricted to BVM/airway support. An option will also be available to extend airway practice to RSI upon meeting requirements in excess of the base: live patient intubations with training and ongoing numbers, QA, extensive medical oversight, double paramedic or nurse/paramedic combination, etc. Rules hearings schedule was discussed. Burton raised question of smallpox guidelines. The MDPB will not formulate a position at this time.	
Next meeting 02/19/2003 (0930 - 1230)		